

8-11-00

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | M. G. | | 6/21/00 |
| O.I.P.E. CLASSIFIER | | 48 | 6/26/00 |
| FORMALITY REVIEW | SA | 859 | 08-08-00 |
| RESPONSE FORMALITY REVIEW | AE | 574 | 11/5/00 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
= Allowed I Interference
- (Through numeral)..... Canceled A Appeal
÷ Restricted O Objected

| Claim | Date |
|----------------|------|
| Final Original | |
| 1 | ✓ |
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| Claim | Date |
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| Final Original | |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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